

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>[Signature]</i>	<i>[Signature]</i>	6/22/99
O.I.P.E. CLASSIFIER		5	6/22/99
FORMALITY REVIEW	UNMO	108231	7/2/99

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ..... Canceled      A ..... Appeal  
 - ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	✓	10/2/96
2	✓	✓	10/2/96
3	✓	✓	10/2/96
4	✓	✓	10/2/96
5	✓	✓	10/2/96
6	✓	✓	10/2/96
7	✓	✓	10/2/96
8	✓	✓	10/2/96
9	✓	✓	10/2/96
10	✓	✓	10/2/96
11	✓	✓	10/2/96
12	✓	✓	10/2/96
13	✓	✓	10/2/96
14	✓	✓	10/2/96
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If more than 150 claims or 10 actions  
staple additional sheet here

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